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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/553,575			ing Date 26/2006	To be Mailed		
	Al	PPLICATION A	AS FILE	SMALL	OTHER THAN SMALL ENTITY OR SMALL ENTITY									
Н	FOR	N	NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A		ı	N/A		1	N/A			
	SEARCH FEE (37 CFR 1 16(k), (i), a	or (m))	N/A		N/A			N/A]	N/A			
	EXAMINATION FE (37 CFR 1,16(o), (p),	iE or (q))	N/A		N/A			N/A			N/A			
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		П	x s =		OR	x s =			
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =		•		ı	X \$ =		1	X \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	sheer is \$25 addit 35 U.	If the specification and sheets of paper, the ap is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a			pplication size fee due Il entity) for each r fraction thereof. See and 37 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								TOTAL		4				
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								L	J	TOTAL			
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)									SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT	09/15/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16(i))	· 27	Minus	40		= 0	П	X \$26 =	0	OR	X 8 =			
	Independent (37 CFR 1.16(h))	• 4	Minus	5		- 0	П	X \$110 =	0	OR	X \$ =			
	Application Size Fee (37 CFR 1.16(s))													
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1,16())		Minus	:		-	П	X \$ =		OR	x s =			
	Independent (37 OFR 1 16(h))		Minus	***		-	ı	X \$ =		OR	X \$ =			
	Application Size Fee (37 CFR 1.16(s))]				
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
										OR	TOTAL ADD'L FEE			
* If the entry in column 1 is less than the entry in column 2, write *0" in column 3. ** If the *Highest Number Previously Paid For "In THIS SPACE is less than 3, enter *20". ** If the *Highest Number Previously Paid For "In THIS SPACE is less than 3, enter *3". The *Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.														

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